

State of Hawaii
Department of Public Safety
Intake Service Center Division

Request for Proposals

RFP No.: PSD 14-ISC-13 Residential, Intensive Outpatient Substance Abuse Treatment Services for Pre-trial Adult Male and Female Defendants on Oahu

November 1, 2013

Note: *It is the applicant's responsibility to check the public procurement notice website, the request for proposals website, or to contact the RFP point-of-contact identified in the RFP for any addenda issued to this RFP. The State shall not be responsible for any incomplete proposal submitted as a result of missing addenda, attachments or other information regarding the RFP.*

STATE OF HAWAII
DEPARTMENT OF PUBLIC SAFETY
INTAKE SERVICES CENTER

November 1, 2013

REQUEST FOR PROPOSALS

No.: PSD 14-ISC-13

**Intensive Outpatient and Residential Substance Abuse
Treatment Services for Adult Male and Female Defendants
On Oahu.**

The Department of Public Safety is seeking qualified applicants to provide substance abuse treatment services for adult male and female defendants on Oahu. A contract period approximately two years in duration will have the following funding each year, 1st year \$123,156.00 and \$188,076.00 for the 2nd year.

The goal of Residential and Intensive Outpatient substance abuse treatment services is to reduce recidivism by treating substance abuse and criminality for adult male and female defendants under the pretrial supervision of the OISC. The Service Provider shall conduct an assessment, determine level of treatment, develop an individualized treatment plan for each defendant that is referred for services, and link the defendant with the appropriate substance abuse treatment services in the community.

A non-mandatory orientation meeting will be held on **November 7, 2013**, from 1:00 pm, HST, to its adjournment or 2:00 pm, at 919 Ala Moana Boulevard, Room 413, Honolulu, Hawaii 96814. Those applicants not able to attend in person, are encouraged to call in 1(712) 432-1500 and enter 982645# when prompted.

Proposals must be postmarked by the **US mail** before midnight on **December 2, 2013**, or hand delivered by 4:30PM, Hawaii Standard Time (HST), at the drop-off sites that are designated on the Proposal Mail-in and Deliver Information Sheet.

Proposals postmarked after midnight on **December 2, 2013**, or hand delivered after 4:30 PM H.S.T. on **December 2, 2013** will not be considered and will be late returned to the applicant. There are no exceptions to this requirement.

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PROPOSAL MAIL-IN AND DELIVERY INFORMATION SHEET

NUMBER OF COPIES TO BE SUBMITTED: 4 (One Original and Three (3) Copies)
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ALL MAIL-INS SHALL BE POSTMARKED BY THE UNITED STATES POSTAL SERVICE (USPS) NO LATER THAN **December 2, 2013** and received by the state purchasing agency no later than 10 days from the submittal deadline.

All Mail-ins

Department of Public Safety
ASO-PC
919 Ala Moana Blvd, Room 413
Honolulu, Hawaii 96814

PSD RFP COORDINATOR

Marc S. Yamamoto
Tel. (808) 587-1215
Fax. (808) 587-1244
e-mail: marc.s.yamamoto@hawaii.gov

ALL HAND DELIVERIES SHALL BE ACCEPTED AT THE FOLLOWING SITES UNTIL **4:30 P.M., Hawaii Standard Time (HST), December 2, 2013**. Deliveries by private mail services such as FEDEX shall be considered hand deliveries. Hand deliveries shall not be accepted if received after 4:30 p.m., **December 2, 2013**.

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Section 1

Administrative Overview

Section 1

Administrative Overview

Applicants are encouraged to read each section of the RFP thoroughly. While sections such as the administrative overview may appear similar among RFPs, state purchasing agencies may add additional information as applicable. It is the responsibility of the applicant to understand the requirements of *each* RFP.

1.1 Procurement Timetable

Note that the procurement timetable represents the State's best estimated schedule. If an activity on this schedule is delayed, the rest of the schedule will likely be shifted by the same number of days. Contract start dates may be subject to the issuance of a notice to proceed.

<u>Activity</u>	<u>Scheduled Date</u>
Public notice announcing Request for Proposals (RFP)	Nov. 1, 2013
Distribution of RFP	Nov. 1, 2013
RFP orientation session	Nov. 7, 2013
Closing date for submission of written questions for written responses	Nov. 13, 2013
State purchasing agency's response to applicants' written questions	Nov. 15, 2013
Discussions with applicant prior to proposal submittal deadline (optional)	
Proposal submittal deadline	Dec. 2, 2013
Discussions with applicant after proposal submittal deadline (optional)	Dec. 4 – 6, 2013
Final revised proposals (optional)	Dec 12 , 2013
Proposal evaluation period	Dec. 3 – 17, 2013
Provider selection	Dec. 18, 2013
Notice of statement of findings and decision	Dec. 20, 2013
Contract start date	Jan. 2, 2014

1.2 Website Reference

The State Procurement Office (SPO) website is <http://hawaii.gov/spo>

For		Click on “Doing Business with the State” tab or
1	Procurement of Health and Human Services	http://hawaii.gov/spo/health-human-svcs/doing-business-with-the-state-to-provide-health-and-human-services
2	RFP website	http://hawaii.gov/spo/general/procurement-notice-for-solicitations
3	Hawaii Revised Statutes (HRS) and Hawaii Administrative Rules (HAR) for Purchases of Health and Human Services	http://hawaii.gov/spo/general/statutes-and-rules/procurement-statutes-and-administrative-rules
4	Forms	http://hawaii.gov/spo/statutes-and-rules/general/spo-forms
5	Cost Principles	http://hawaii.gov/spo/health-human-svcs/cost-principles-for-procurement-of-health-and-human-services
6	Standard Contract -General Conditions, AG103F13	http://hawaii.gov/spo/general/gen-cond/general-conditions-for-contracts
7	Protest Forms/Procedures	http://hawaii.gov/spo/health-human-svcs/protestsreqforreconsideration/protests-requests-for-reconsideration-for-private-providers

Non-SPO websites

(Please note: website addresses may change from time to time. If a link is not active, try the State of Hawaii website at <http://hawaii.gov>)

For		Go to
8	Hawaii Compliance Express (HCE)	https://vendors.ehawaii.gov/hce/splash/welcome.html
9	Department of Taxation	http://hawaii.gov/tax/
10	Wages and Labor Law Compliance, HRS §103-055	http://capitol.hawaii.gov/hrscurrent
11	Department of Commerce and Consumer Affairs, Business Registration	http://hawaii.gov/dcca click “Business Registration”
12	Campaign Spending Commission	http://hawaii.gov/campaign

1.3 Authority

This RFP is issued under the provisions of the Hawaii Revised Statutes (HRS) Chapter 103F and its administrative rules. All prospective applicants are charged with presumptive knowledge of all requirements of the cited authorities. Submission of a valid executed proposal by any prospective applicant shall

constitute admission of such knowledge on the part of such prospective applicant.

1.4 RFP Organization

This RFP is organized into five sections:

Section 1, Administrative Overview: Provides applicants with an overview of the procurement process.

Section 2, Service Specifications: Provides applicants with a general description of the tasks to be performed, delineates provider responsibilities, and defines deliverables (as applicable).

Section 3, Proposal Application Instructions: Describes the required format and content for the proposal application.

Section 4, Proposal Evaluation: Describes how proposals will be evaluated by the state purchasing agency.

Section 5, Attachments: Provides applicants with information and forms necessary to complete the application.

1.5 Contracting Office

The Contracting Office is responsible for overseeing the contract(s) resulting from this RFP, including system operations, fiscal agent operations, and monitoring and assessing provider performance. The Contracting Office is:

Department of Public Safety
919 Ala Moana Boulevard, Room 401
Honolulu, Hawaii 96814

Telephone: (808) 587-1262
Facsimile: (808) 587-2582
e-mail: milton.h.kotsubo@hawaii.gov

1.6 RFP Contact Person

From the release date of this RFP until the selection of the successful provider(s), any inquiries and requests shall be directed to the sole point-of-contact identified below.

Marc Yamamoto, Procurement and Supply Specialist IV
Department of Public Safety
ASO-PC
919 Ala Moana Boulevard, Room 413
Honolulu, Hawaii 96814

Telephone: (808) 587-1215 Facsimile: (808) 587-1244

e-mail: marc.s.yamamoto@hawaii.gov

1.7 Orientation

An orientation for applicants in reference to the request for proposals will be held as follows:

Date: November 7, 2013 **Time:** 1:00 pm – 2:00 pm, HST
Location: 919 Ala Moana Boulevard, Room 413
Honolulu, Hawaii 96814

Those applicants not able to attend in person, are encouraged to call in 1(712) 432-1500 and enter 982645# when prompted.

Applicants are encouraged to submit written questions prior to the orientation. Impromptu questions will be permitted at the orientation and spontaneous answers provided at the state purchasing agency's discretion. However, answers provided at the orientation are only intended as general direction and may not represent the state purchasing agency's position. Formal official responses will be provided in writing. To ensure a written response, any oral questions should be submitted in writing following the close of the orientation, but no later than the submittal deadline for written questions indicated in the subsection 1.8, Submission of Questions.

1.8 Submission of Questions

Applicants may submit questions to the RFP Contact Person identified in Section 1.6. Written questions should be received by the date and time specified in Section 1.1 Procurement Timetable. The purchasing agency will respond to written questions by way of an addendum to the RFP.

Deadline for submission of written questions:

Date: November 13, 2013 **Time:** 2:00 pm HST

State agency responses to applicant written questions will be provided by:

Date: November 15, 2013

1.9 Submission of Proposals

A. **Forms/Formats** - Forms, with the exception of program specific requirements, may be found on the State Procurement Office website referred to in subsection 1.2, Website Reference. Refer to the Section 5, Proposal Application Checklist for the location of program specific forms.

1. **Proposal Application Identification (Form SPOH-200).** Provides applicant proposal identification.

2. **Proposal Application Checklist.** The checklist provides applicants specific program requirements, reference and location of required RFP proposal forms, and the order in which all proposal components should be collated and submitted to the state purchasing agency.
 3. **Table of Contents.** A sample table of contents for proposals is located in Section 5, Attachments. This is a sample and meant as a guide. The table of contents may vary depending on the RFP.
 4. **Proposal Application (Form SPOH-200A).** Applicant shall submit comprehensive narratives that address all proposal requirements specified in Section 3, Proposal Application Instructions, including a cost proposal/budget, if required.
- B. **Program Specific Requirements.** Program specific requirements are included in Sections 2 and 3, as applicable. Required Federal and/or State certifications are listed on the Proposal Application Checklist in Section 5.
- C. **Multiple or Alternate Proposals.** Multiple or alternate proposals shall not be accepted unless specifically provided for in Section 2. In the event alternate proposals are not accepted and an applicant submits alternate proposals, but clearly indicates a primary proposal, it shall be considered for award as though it were the only proposal submitted by the applicant.
- D. **Hawaii Compliance Express (HCE).** All providers shall comply with all laws governing entities doing business in the State. Providers shall register with HCE for online compliance verification from the Hawaii State Department of Taxation (DOTAX), Internal Revenue Service (IRS) , Department of Labor and Industrial Relations (DLIR) , and Department of Commerce and Consumer Affairs (DCCA) . There is a nominal annual registration fee (currently \$12) for the service. The HCE's online "Certificate of Vendor Compliance" provides the registered provider's current compliance status as of the issuance date, and is accepted for both contracting and final payment purposes. Refer to **subsection 1.2, Website Reference**, for HCE's website address.
- **Tax Clearance.** Pursuant to HRS §103-53, as a prerequisite to entering into contracts of \$25,000 or more, providers are required to have a tax clearance from DOTAX and the IRS. (See subsection 1.2, Website Reference for DOTAX and IRS website address.)
 - **Labor Law Compliance.** Pursuant to HRS §103-55, providers shall be in compliance with all applicable laws of the federal and state governments relating to workers' compensation, unemployment compensation, payment of wages, and safety. (See subsection 1.2, Website Reference for DLIR website address.)
 - **DCCA Business Registration.** Prior to contracting, owners of all forms of business doing business in the state except sole proprietorships,

charitable organizations, unincorporated associations and foreign insurance companies shall be registered and in good standing with the DCCA, Business Registration Division. Foreign insurance companies must register with DCCA, Insurance Division. More information is on the DCCA website. (See subsection 1.2, Website Reference for DCCA website address.)

- E. **Wages Law Compliance.** If applicable, by submitting a proposal, the applicant certifies that the applicant is in compliance with HRS §103-55, Wages, hours, and working conditions of employees of contractors performing services. Refer to HRS §103-55, at the Hawaii State Legislature website. (See subsection 1.2, Website Reference for DLIR website address.)
- F. **Campaign Contributions by State and County Contractors.** HRS §11-355 prohibits campaign contributions from certain State or county government contractors during the term of the contract if the contractors are paid with funds appropriated by a legislative body. Refer to HRS §11-355. (See subsection 1.2, Website Reference for Campaign Spending Commission website address.)
- G. **Confidential Information.** If an applicant believes any portion of a proposal contains information that should be withheld as confidential, the applicant shall request in writing nondisclosure of designated proprietary data to be confidential and provide justification to support confidentiality. Such data shall accompany the proposal, be clearly marked, and shall be readily separable from the proposal to facilitate eventual public inspection of the non-confidential sections of the proposal.

Note that price is not considered confidential and will not be withheld.

- H. **Proposal Submittal.** All mail-ins shall be postmarked by the United States Postal System (USPS) and received by the State purchasing agency no later than the submittal deadline indicated on the attached Proposal Mail-in and Delivery Information Sheet, or as amended. All hand deliveries shall be received by the State purchasing agency by the date and time designated on the Proposal Mail-In and Delivery Information Sheet, or as amended. Proposals shall be rejected when:
 - 1. Postmarked after the designated date; or
 - 2. Postmarked by the designated date but not received within 10 days from the submittal deadline; or
 - 3. If hand delivered, received after the designated date and time.

The number of copies required is located on the Proposal Mail-In and Delivery Information Sheet. Deliveries by private mail services such as FEDEX shall be considered hand deliveries and shall be rejected if received after the submittal deadline. Dated USPS shipping labels are not considered postmarks.

Proposals submitted electronically (via fax or email) are not acceptable and will be rejected.

1.10 Discussions with Applicants

- A. **Prior to Submittal Deadline.** Discussions may be conducted with potential applicants to promote understanding of the purchasing agency's requirements.
- B. **After Proposal Submittal Deadline -** Discussions may be conducted with applicants whose proposals are determined to be reasonably susceptible of being selected for award, but proposals may be accepted without discussions, in accordance with HAR §3-143-403.

1.11 Opening of Proposals

Upon the state purchasing agency's receipt of a proposal at a designated location, proposals, modifications to proposals, and withdrawals of proposals shall be date-stamped, and when possible, time-stamped. All documents so received shall be held in a secure place by the state purchasing agency and not examined for evaluation purposes until the submittal deadline.

Procurement files shall be open to public inspection after a contract has been awarded and executed by all parties.

1.12 Additional Materials and Documentation

Upon request from the state purchasing agency, each applicant shall submit additional materials and documentation reasonably required by the state purchasing agency in its evaluation of the proposals.

1.13 RFP Amendments

The State reserves the right to amend this RFP at any time prior to the closing date for final revised proposals.

1.14 Final Revised Proposals

If requested, final revised proposals shall be submitted in the manner and by the date and time specified by the state purchasing agency. If a final revised proposal is not submitted, the previous submittal shall be construed as the applicant's final revised proposal. *The applicant shall submit **only** the section(s) of the proposal that are amended, along with the Proposal Application Identification Form (SPOH-200).* After final revised proposals are received, final evaluations will be conducted for an award.

1.15 Cancellation of Request for Proposal

The RFP may be canceled and any or all proposals may be rejected in whole or in part, when it is determined to be in the best interest of the State.

1.16 Costs for Proposal Preparation

Any costs incurred by applicants in preparing or submitting a proposal are the applicants' sole responsibility.

1.17 Provider Participation in Planning

Provider(s), awarded a contract resulting from this RFP,

☐ are required

☒ are not required

to participate in the purchasing agency's future development of a service delivery plan pursuant to HRS §103F-203.

Provider participation in a state purchasing agency's efforts to plan for or to purchase health and human services prior to the release of a RFP, including the sharing of information on community needs, best practices, and providers' resources, shall not disqualify providers from submitting proposals, if conducted in accordance with HAR §§3-142-202 and 3-142-203.

1.18 Rejection of Proposals

The State reserves the right to consider as acceptable only those proposals submitted in accordance with all requirements set forth in this RFP and which demonstrate an understanding of the problems involved and comply with the service specifications. Any proposal offering any other set of terms and conditions contradictory to those included in this RFP may be rejected without further notice.

A proposal may be automatically rejected for any one or more of the following reasons:

- (1) Rejection for failure to cooperate or deal in good faith. (HAR §3-141-201)
- (2) Rejection for inadequate accounting system. (HAR §3-141-202)
- (3) Late proposals (HAR §3-143-603)
- (4) Inadequate response to request for proposals (HAR §3-143-609)
- (5) Proposal not responsive (HAR §3-143-610(a)(1))
- (6) Applicant not responsible (HAR §3-143-610(a)(2))

1.19 Notice of Award

A statement of findings and decision shall be provided to each responsive and responsible applicant by mail upon completion of the evaluation of competitive purchase of service proposals.

Any agreement arising out of this solicitation is subject to the approval of the Department of the Attorney General as to form, and to all further approvals, including the approval of the Governor, required by statute, regulation, rule, order or other directive.

No work is to be undertaken by the provider(s) awarded a contract prior to the contract commencement date. The State of Hawaii is not liable for any costs incurred prior to the official starting date.

1.20 Protests

Pursuant to HRS §103F-501 and HAR Chapter 148, an applicant aggrieved by an award of a contract may file a protest. The Notice of Protest form, SPOH-801, and related forms are available on the SPO website. (See subsection 1.2, Website Reference for website address.) Only the following matters may be protested:

- (1) A state purchasing agency's failure to follow procedures established by Chapter 103F of the Hawaii Revised Statutes;
- (2) A state purchasing agency's failure to follow any rule established by Chapter 103F of the Hawaii Revised Statutes; and
- (3) A state purchasing agency's failure to follow any procedure, requirement, or evaluation criterion in a request for proposals issued by the state purchasing agency.

The Notice of Protest shall be postmarked by USPS or hand delivered to 1) the head of the state purchasing agency conducting the protested procurement and 2) the procurement officer who is conducting the procurement (as indicated below) within five working days of the postmark of the Notice of Findings and Decision sent to the protestor. Delivery services other than USPS shall be considered hand deliveries and considered submitted on the date of actual receipt by the state purchasing agency.

Head of State Purchasing Agency	Procurement Officer
Name: Ted Sakai	Name: Teresita V. Fernandez
Title: Director	Title: Acting Business Management Officer
Mailing Address: 919 Ala Moana Boulevard, Room 400 Honolulu, Hawaii 96814	Mailing Address: 919 Ala Moana Boulevard, Room 413 Honolulu, Hawaii 96814
Business Address: Same as above.	Business Address: Same as above.

1.21 Availability of Funds

The award of a contract and any allowed renewal or extension thereof, is subject to allotments made by the Director of Finance, State of Hawaii, pursuant to HRS Chapter 37, and subject to the availability of State and/or Federal funds.

Funding for this contract is through a grant from the Laura and John Arnold Foundation and subject to the availability of funds from this grant.

1.22 General and Special Conditions of Contract

The general conditions that will be imposed contractually are on the SPO website. (See subsection 1.2, Website Reference for website address.) Special conditions may also be imposed contractually by the state purchasing agency, as deemed necessary.

1.23 Cost Principles

To promote uniform purchasing practices among state purchasing agencies procuring health and human services under HRS Chapter 103F, state purchasing agencies will utilize standard cost principles outlined in Form SPOH-201, which is available on the SPO website. (See subsection 1.2 Website Reference for website address.) Nothing in this section shall be construed to create an exemption from any cost principle arising under federal law.

Section 2

Service Specifications

Section 2

Service Specifications

2.1 Introduction

A. Overview, purpose or need

The Department of Public Safety (PSD) - Oahu Intake Service Center (OISC) evaluates approximately 150 adult male and female pretrial defendants a month for pretrial release. Approximately 60 of these defendants are granted release each month, under various forms of supervision. Currently, the OISC supervises 468 adult male and female pretrial felony and misdemeanor defendants, all of whom are subject to urinalysis drug testing. The evidence shows that over 60% of these defendants abused substances just prior or recent to arrest.

OISC believes that if a defendant's substance abuse problem is left untreated, the likelihood for succeeding on pretrial release is severely diminished. By treating this significant criminogenic need, the defendant's ability to conform to the terms and conditions of his/her pretrial release will be greatly enhanced. If a defendant does not have effective substance abuse treatment available, it may hinder the defendant's ability to successfully transition back into the community. If the defendant is provided the appropriate level of substance abuse treatment, it will likely enhance public safety by reducing recidivism.

Adult male and female defendants who are on felony pretrial supervision, are on supervision for a relatively short periods of time (six months), and their substance abuse issues are usually in the acute phase; therefore, there is a need to provide evidence-based Residential, Intensive Outpatient (IOP), and Outpatient (OP) substance abuse treatment services.

When the defendant's pretrial supervision terminates, either by conviction and sentencing or acquittal, the defendant is *no longer* under the jurisdiction of OISC. If additional substance abuse treatment is needed, the defendant and the Service Provider will need to plan and obtain alternative funding to complete the substance abuse treatment

B. Planning activities conducted in preparation for this RFP

Request for Information was held on September 27, 2013 at 9AM. Responses to questions received are attached on Section Five, "Attachment C"

C. Description of the service goals

The goal of Residential, Intensive Outpatient, and Outpatient substance abuse treatment services is to reduce recidivism by treating substance abuse and criminality for adult male and female defendants under the pretrial supervision of the OISC. The Service Provider shall conduct an assessment, determine level of treatment, develop an individualized treatment plan for each defendant that is referred for services, and link the defendant with the appropriate substance abuse treatment services in the community.

D. Description of the target population to be served

The target population consists of adult male and female defendants who are under the pretrial supervision of the OISC, and has been referred by OISC to the Service Provider for an assessment, and has been identified as needing Residential, IOP or OP substance abuse treatment services based on the Service Provider's assessment.

E. Geographic coverage of service

Substance abuse treatment services shall be provided on Oahu, Hawaii.

F. Probable funding amounts, source, and period of availability

Funding available for services under this RFP is approximately \$123,156 for the initial 12 months and \$188,076 for the following year, and subject to the availability of funds. PSD is the recipient of a two year grant.

It is essential that the Service Provider plan for an abrupt end to funding from this contract. When the defendant's pretrial period ends, either by conviction and sentencing or acquittal, the defendant is no longer under the jurisdiction of OISC. If additional treatment is needed, the defendant and the contractor will need to plan for and obtain alternative funding to complete treatment.

2.2 Contract Monitoring and Evaluation

The criteria by which the performance of the contract will be monitored and evaluated are:

- (1) Performance/Outcome Measures;
- (2) Output Measures;
- (3) Quality of Care/Quality of Services;
- (4) Financial Management;
- (5) Administrative Requirements;
- (6) Responsiveness to Client referrals; and
- (7) Responsiveness to requests for information from PTO.

2.3 General Requirements

A. Specific qualifications or requirements, including but not limited to licensure or accreditation

1. Service Provider shall have licenses and certificates, as applicable, in accordance with Federal, State and County laws. The Service Provider shall operate the program in accordance with the rules, regulations and policies of PSD. The Service Provider shall monitor the defendants' behavior to ensure compliance with all State, Federal, and County laws and rules and regulations of PSD.
2. Residential programs, in accordance with Title 11, Chapter 98, Special Treatment Facility, must have a Special Treatment Facility license at the time of application and abide by applicable administrative rules governing accreditation of substance abuse programs.
3. Service Provider shall comply with Title 11, Chapter 175, Mental Health and Substance Abuse System.
4. Service Provider shall comply with the Chapter 103F, HRS, *Cost Principles for Purchases of Health and Human Services* identified in SPO-H-201 (Effective 10/1/98), which can be found on the SPO Website (see Section 5, POS Proposal Checklist, for the website address).
5. Service Provider shall submit a copy of its operating policies and procedures to PSD when requested. The copy is to be provided at the Service Provider's expense.
6. Service Provider shall assign staff to attend provider meetings as scheduled by PSD.
7. All substance abuse records shall be kept confidential pursuant to *42 Code of Federal Regulations (42CFR), Part 2, Confidentiality of Alcohol and Drug Abuse Patient Records* and, if necessary, the Service Provider shall resist in judicial proceedings, any efforts to obtain access to patient records except as permitted by such regulations, *and Section 334-5, HRS, Confidentiality of Records*.
8. Service Provider shall adopt a policy regarding tuberculosis (TB) that states it provides for TB education as appropriate, and notifies PSD of such illness.
9. Service Provider shall develop and maintain fiscal, statistical, and administrative records pertaining to services as specified by PSD.

10. Service Provider shall operate as a profit corporation under the laws of the State of Hawaii or non-profit organization determined by the Internal Revenue Services to be exempt from the Federal income tax. If a non-profit corporation, the Service Provider must have a governing boards whose members have no material conflict or interest and serve without compensation.
11. Service Provider shall incorporate best practices/evidence-based practices in any substance abuse treatment service. Best practices/evidence-based practices are defined as a body of contemporaneous empirical research findings that produce the most efficacious outcomes for persons with substance abuse problems, has literature to support the practices, is supported by national consensus, has a system for implementing and maintaining program integrity, and conformance to professional standards. For best practices in specific areas of substance abuse, the Service Provider may consult the Substance Abuse and Mental Health Services Administration (SAMHSA) Treatment Improvement Protocol Series (TIPS), the National Institute on Drug Abuse's (NIDA) Principles of Drug Addiction Treatment, and/or access website resources listed in Attachment E-7, "Important Website Addresses."
12. Service Provider shall have a mechanism for receiving, documenting, and responding to consumer grievances, including an appeals process.
13. Service Provider shall have a written plan for disaster preparedness.
14. Service Provider shall have by-laws or policies that describe the manner in which business is conducted and policies that relate to nepotism and management of potential conflict of interest situations.
15. The Service Provider shall be required to accept pretrial defendants who have been assessed by PSD as being appropriate for services, unless the Service Provider presents to PSD, justifiable reason(s) that a defendant should not be accepted into the program. Services shall be provided to only those defendants referred by PSD. PSD shall make the final determination as to whether a defendant will continue to receive substance abuse treatment services or to be terminated from receiving substance abuse treatment services.
16. Service Provider shall be responsible for the coordination and the delivery of services to defendants. PSD shall approve any deviation from the number of sessions held with each defendant in writing.
17. Service Provider shall conduct random urinalysis testing of substance abuse. Service Provider must obtain approval for the method and tools to

be used for urinalysis testing with the Administrators of PSD. Service Provider shall immediately notify the referring Pretrial Officer (PTO) when a defendant has a positive urinalysis.

18. As ruled by the Office of Information Practices, PSD may withhold from inspection by the defendant or his/her attorney, all confidential progress reports, assessment reports, and treatment recommendations provided by the Service Provider, unless instructed otherwise by the Department of the Attorney General. Whenever the Service Provider is requested by the defendant, his/her family, or his/her attorney, to provide assessment reports or treatment progress reports to the defendant, his/her family, or his/her attorney, the Service Provider shall inform the requesting party that such reports are the property of PSD, and that all requests should be directed to the contracting officer. Service Provider shall notify the contracting officer, that such a request was made. The Service Provider shall not release such reports directly to the defendant or to any party representing the defendant. Hawaii Revised Statutes Chapter 92, Section F-22 (1) (B) prohibits the release of confidential records that were previously submitted to criminal justice agencies.
19. Service Provider shall allow the appropriate agency's (i.e. PSD, HPA, Office of Youth Services, Attorney General, and Judiciary) staff to use the Correctional Program Checklist (CPC). Service Provider shall be willing to cooperate with the staff and findings from the CPC.
20. Service Provider shall have staff certified in First Aid and Cardiopulmonary Resuscitation (CPR).
21. Service Provider's facilities must meet Americans with Disabilities Act (ADA) requirements, as applicable and special equipment that may be required for the services.

B. Secondary purchaser participation
(Refer to HAR §3-143-608)

After-the-fact secondary purchases will be allowed.
Planned secondary purchases: none.

C. Multiple or alternate proposals
(Refer to HAR §3-143-605)

☐ Allowed ☒ Unallowed

D. Single or multiple contracts to be awarded

(Refer to HAR §3-143-206)

☒ Single

 ☐ Multiple

 ☐ Single & Multiple

Criteria for multiple awards: Not applicable.

E. Single or multi-term contracts to be awarded

(Refer to HAR §3-149-302)

☐ Single term (2 years or less)

 ☒ Multi-term (more than 2 years)

Contract terms:

Initial term of contract: For the twenty-four month period beginning January 2, 2014 to January 1, 2016, or the commencement date stated on the Notice to Proceed.

Length of each extension: Twelve months or portion(s) thereof.

Number of possible extensions: Two (2)

Maximum length of contract: Forty-eight months.

The initial period shall commence on the contract start date or Notice to Proceed, whichever is later.

Conditions for extension:

Extensions, if exercised, shall be in writing, executed prior to the expiration of the contract, and subject to the availability of funds.

2.4 Scope of Work

Service Provider will be required to accept adult male and female defendants under the pretrial supervision of the OISC, and who have been referred by OISC as being appropriate for services, unless the Service Provider presents to PSD, justifiable reason that a defendant should not be accepted into the program. The Service Provider shall provide only those treatment services agreed to in advance by PSD as required by the defendant. The Service Provider shall not extend the treatment period or terminate a defendant without prior approval from PSD.

This RFP contains the specific components of substance abuse treatment services requested by PSD. Multiple substance abuse treatment services for defendants shall be comprehensive and include a continuum of services such as Initial Screening and Assessment Services, Residential and IOP modalities as defined below. Services under this section shall be provided to those defendants referred by PSD. Substance abuse treatment program components shall include:

The scope of work encompasses the following tasks and responsibilities:

A. **Service Activities**

(Minimum and/or mandatory tasks and responsibilities)

1. Assessment Services and Treatment Planning

Service Provider shall conduct screening and assessment services of defendants referred for treatment within a maximum of **three (3) working days but sooner if possible**. Assessment results shall be presented in writing to the referring PTO within **seven (7) working days of admission but sooner if possible**.

As part of the assessment process, the Service Provider may discuss the defendant's institutional file with the referring PTO, for any additional information that may contribute to formation of the treatment plan. Information gathered in the assessment will be used to develop a treatment plan.

Based on the assessment results, individualized treatment plans shall be developed for all defendants approved for treatment. Treatment plans shall be prepared **within fourteen (14) days of admission** by program's staff in cooperation with the defendant. Treatment plans shall include treatment services (e.g., group, individual, and education), projected time in treatment, short and long-range goals, and should measure an defendant's progress in treatment. The defendant will be included in the development of the treatment plan, which becomes part of the treatment record. The Service Provider will develop treatment phases that reflect measurable and observable changes in the defendants' attitudes and behaviors. The treatment plans shall coincide with the treatment phases and document defendant behavioral and attitudinal changes.

Service Provider shall develop a mechanism for periodic review and updating of the treatment plan as the defendant progresses through treatment with monthly written progress reports being submitted to the referring PTO. Service Provider shall notify the referring PTO when a defendant is not accepted into the program, defendants who do not contact the program, and of those who don't attend their initial sessions **within five (5) working days** of the referral.

The proposal must include the assessment instrument to be used, the process to be used for reviewing and updating the defendant's treatment plan, the estimated number of assessments to be conducted annually, and the unit cost for the assessment services.

Service Provider shall ***openly communicate*** with the referring PTO.

2. Education and Treatment Services

Case Management provides services to assist and support defendants in developing their skills to gain access to needed medical, social, educational and other services essential to meeting basic human services, linkages and training for the defendant served in the use of basic community resources, and monitoring of overall service delivery. Staff members whose primary function is case management, generally provide this service.

Program shall be tailored to deal with needs identified in the defendant's assessment and treatment plan. The treatment shall be matched with the appropriate levels of care that meet individual needs based on assessment of defendant characteristics, such as learning style and responsivity. Program services should include both educational services (i.e., criminogenic issues, cognitive restructuring, skill building, family issues, and substance abuse/addiction issues) and group counseling. Service Provider shall utilize a cognitive-behavioral curriculum that addresses the interaction of criminal thinking and drug abuse using a group treatment format. The curriculum shall offer a method that allows participants to explore and correct their thinking errors, learn new coping behaviors, and rehearse and practice these new behaviors and attitudes for optimal skill development. Treatment must target criminogenic issues such as antisocial attitudes, chemical dependency, criminal companions, physical and mental health, social relationships, vocational/financial, residence/neighborhood, and education. Where appropriate, the Service Provider shall offer a relapse prevention component to the treatment program that includes education, and rehearsal and practice of relapse prevention skills.

Service Provider will develop an open-ended treatment program. Clinical discharge from the treatment program shall be contingent on the participation and progress in the treatment program and not solely on time spent in the program. The length of stay in treatment shall be sufficient for change to occur, but not so long as to reduce treatment effectiveness. Service Provider shall develop and implement an appropriate transition plan for each defendant in the final phase of treatment prior to discharge. The plan shall address transition and recovery issues and relapse prevention and shall be reviewed with the referring PTO prior to implementation.

3. Individual, Family/Couple, and Group Counseling

The treatment program shall include: Individual Counseling which provides the utilization of special skills by a clinician to assist

defendants and/or their families/significant others in achieving treatment objectives through the exploration of alcohol and other drug problems/addiction and their ramifications, including an examination of attitudes and feelings, consideration of alternative solutions and decision making, or discussing didactic materials with regard to alcohol and other drug related problems. The Service Provider shall conduct individual counseling session for each participating defendant at each phase increment or when necessary as dictated by the counselor or when requested by the defendant. The recommended session length should be about fifteen (15) minutes. Some defendants may require additional assistance to learn treatment materials, to accept the need to change, or to overcome their specific barriers to change. Individual counseling sessions may be provided to deal with issues not appropriate for the group setting; **Family/Couple Counseling**, which provides counseling for alcohol and/or drug treatment with an defendant's family member or significant other, typically delivered as a scheduled hourly event; **Skills Development**, which provides activities to develop a range of skills to help maximize defendant community integration and independent living. Services may be provided in individual or group setting; **Group Counseling**, which provides the utilization of special skills by a clinician to assist two or more individuals and/or their families/significant others in achieving treatment objectives through the exploration of alcohol and other drug problems and/or addiction and their ramifications, including an examination of attitudes and feelings, consideration of alternative solutions and decision making, and/or discussing didactic materials with regard to alcohol and other drug related problems.

4. Outpatient Program (OP)

Service Providers shall have a component for defendants that successfully complete IOP. The outpatient program shall be provided for the purpose of reinforcing and maintaining recovery. It is well documented in the corrections treatment research, and has been observed in PSD's own population, that defendants who complete treatment, and who return to the general population without any continuing support, lose the effects of treatment, and regress back to criminal attitudes and behaviors.

The outpatient component of treatment must encompass the aspects of relapse prevention, criminal conduct behaviors and attitudes, and prevention of recidivism. Additionally, other topics related to recovery should be added to the repertoire of curriculum topics, such as recovery support systems, assertiveness vs. aggression, transportation issues, etc. It should also be noted that the offender must comply with all

recommendations that are on his discharge summary from primary treatment.

The outpatient component shall provide non-residential comprehensive specialized services on a scheduled basis for defendants with substance abuse problems. Professional directed evaluation, treatment, case management, and recovery services shall be provided to defendants with less problematic substance abuse related behavior than would be found in a residential or day treatment program. Outpatient programs consist of the following: Service Provider shall provide **between one (1) and eight (8) hours per offender per week** of face-to-face treatment and **one (1) hour of scheduled individual counseling per offender per month**. The scheduling of one (1) hour per offender per week of individual counseling is recommended when clinically indicated.

5. Intensive Outpatient Program (IOP)

Service Provider shall provide non-residential alcohol and/or other drug treatment service that usually operates for **at least three (3) or more hours per day for three or more days per week**, in which the defendant participates in accordance with an approved Individualized Treatment Plan. IOP services may include, but are not limited to: individual and group counseling, crisis intervention, referral and information, drug screening services and nutrition counseling; however, the listed below must be provided:

IOP shall include, but are not limited to, the following face-to-face activities: Assessment Services; Individual and Group Counseling Services; Crisis Intervention Services; and Activity therapies and/or alcoholism and other drug addiction participant education. Service Provider shall provide a **minimum of nine (9) hours and up to a maximum of fifteen (15) hours per client per week** of face-to-face treatment. The scheduling of a **one (1) hour per defendant per week session of individual counseling** is recommended.

6. Residential Program

Service Provider shall provide 24-hour per day non-medical, non-acute care in a residential treatment facility that provides support, typically for more than thirty days for persons with alcohol and other drug problems and/or addiction.

Residential includes a planned regimen of professionally directed evaluation, treatment, case management, and other ancillary and special services. Observation and monitoring area available twenty-four (24) hours a day, and treatment seven (7) days a week.

Residential shall include, but are not limited to, the following face-to-face activities: Group counseling, education, skill building, recreational therapy, and family services. The scheduling of a **one (1) hour per defendant per week session of individual counseling** is recommended.

B. Management Requirements (Minimum and/or mandatory requirements)

1. Personnel

Service Provider shall demonstrate that all current staff meet all licensing and or credential requirements. Service Provider shall employ staff that is suitable to deal with defendants.

No persons currently serving a criminal sentence (i.e. furlough from a correctional facility, on probation, on parole, or under the terms of a DAG/DANC plea) shall be hired by the Service Provider or sub-contractor.

Any employee with a criminal history shall be subject to review and approval by PSD. PSD will review and agree to the employment of staff and sub-Service Providers in writing. PSD must agree upon, any changes to staff and/or sub-Service Providers in writing.

The staff and volunteers, if used by the Service Provider, must be under the supervision of the program director or his or her designee and shall accordingly be trained in defendant confidentiality issues and program quality assurance requirements.

Service Provider must have sufficient and relevant staff training and development. All direct service staff shall have training in and be familiar with current procedures and practices, intake, admission, and referral of defendants.

The Service Provider and/or Sub-Provider shall notify each of its employees as well as employees of any subcontractors, who provide services to any person committed to the custody of the Director of Public Safety for imprisonment pursuant to Chapter 706, including a probationer serving a term of imprisonment pursuant to Section 706-624(2)(a) and a misdemeanor or petty misdemeanor sentenced pursuant to Section 706-663, of the Hawaii Revised Statute, Section 707-731, Sexual assault in the second degree and Section 707-732, Sexual assault in the third degree. In addition the Service Provider and any subcontractor shall maintain a copy of the aforementioned statutes and shall maintain in each of the aforementioned employees

and employees of any subcontractors' file written documentation that the employee has received notice of the statutes.

Service Provider shall ensure that clinical supervision over treatment activities is provided by substance abuse counselors (SACs) or program administrators certified pursuant to Section 321-103 (10), Hawaii Revised Statutes; or hold an advanced degree in behavioral health science, with at least one year working in the field of substance abuse addiction. Certified SACs and individuals who hold an advanced degree in behavioral health services shall perform clinical evaluation, treatment planning and individual, group and family counseling; however, non-certified SACs or non-master's level Service Providers may be utilized as long as they are directly supervised by a certified SAC or master's level counselor, and are working toward certification. The Service Provider shall ensure the staff receives appropriate supervision including clinical supervision and administrative direction.

The applicant shall provide a description of projects/contracts pertinent to the proposed services. Applicant shall include points of contact, addresses, e-mail/phone numbers. The State reserves the right to contact references to verify experience.

- a. List of experience as an agency providing substance abuse services;
- b. List of experience as an agency providing services to defendants and their families.
- c. List of contracts performed for PSD;
- d. List of other prior contracts with the public sector in providing services in general for male and female defendants specifically. Discuss any problems or difficulties encountered in prior contracts. Applicant shall provide a point of contact and telephone number for each contract listed. PSD reserves the right to contact any of the listed points of contact to inquire about the applicant's past service performance and personnel;
- e. Success applicant has had in recruiting and retaining quality staff; and
- f. Applicant's current financial statement and any financial audits completed in the last three (3) years.

For those agencies that do not meet the one-year experience requirement, an exception can be made. The request for an exception shall include at a minimum a discussion of the following:

- a. The reasons why the exception is being requested (i.e., the reasons why the Service Provider does not meet the one year experience

requirement, the service for which funds are being requested is a new service, etc.)

- b. The qualifications and experience of the organization in providing services for other related state programs in the past.

2. Administrative

- a. Service Provider must operate their program in accordance with the rules, regulations, and policies of PSD.
- b. Service Provider is required to meet the qualifying requirements specified in Chapter 103F, Hawaii Revised Statutes.
- c. Service Provider shall have licenses and certificates, as applicable, in accordance with Federal, State and County regulations, and comply with all applicable Hawaii Administrative Rules (HAR). Service Provider shall comply with Title 11, Chapter 175, Mental Health and Substance Abuse System.
- d. Residential Programs, in accordance with Title 11, Chapter 98, Special Treatment Facility, must have a Special Treatment Facility license at the time of application and abide by applicable administrative rules governing accreditation of substance abuse programs.
- e. Service Provider must comply with the State of Hawaii Codes and Regulations (i.e. Fire Code) and all City & County codes, regulations & zoning requirements.
- f. Describe the ability to supervise, train, and provide administrative direction relative to the delivery of substance abuse services.
- g. Service Provider must maintain and show proof of a liability insurance policy of at least two million dollars.
- g. Service Provider and/or Sub-Provider shall inform and educate their employees of all Hawaii Revised Statutes that have reference to the delivery of services for the defendants committed to the custody of the Director of PSD.

3. Quality assurance and evaluation specifications

Service Provider shall ensure quality assurance and ongoing evaluation of the stated goals, objectives and activities of the program.

Service Provider shall describe its own plans for quality assurance and evaluation for the proposed services, including methodology. Service Provider shall have a mechanism for receiving, documenting, and responding to consumer grievances, including an appeals process.

Service Provider shall allow PSD to monitor the Service Provider's compliance with the mandates and evaluate the services performed. Based on the assessment/audit report, the Service Provider will develop in concert with the contracting agency, an action plan to address deficiencies.

The Contract Manager shall evaluate unacceptable professional practice or deviations from the curriculum. The Contract Manager may at any time, recommend suspension of the services under the provisions of this agreement. Prior to the suspension of the agreement by PSD, the Service Provider shall be allowed to make every effort to correct any perceived unprofessional conduct by its staff, and shall be given reasonable time to do so. PSD shall determine reasonable time, but thirty (30) days is typical.

4. Output and performance/outcome measurements

Service Provider shall provide a detailed description of its outcome evaluation and measures of effectiveness and should include, but not limited to:

- Total number of defendants referred to the program
- Number of defendants accepted into the program
- Number of defendants rejected for admission to the program and reasons for rejections
- Number of defendants referred to each component (e.g. assessment, educational, individual counseling, etc.)
- Number of defendants dropping out of each treatment component
- Number of defendants terminated from the program due to misconducts (i.e. positive urinalysis, assault, etc.)
- Number of defendants terminated due to criminal offense
- Number of drug tests administered
- Number of positive results and for which drugs
- Number of defendants completing the program
- Number of defendants who completed the program and remained drug-free
- Number of defendants who completed the program and remained arrest-free

Long term measures of success include recidivism rates and adjustment in the community. However, Service Providers will not be evaluated on measures that occur outside of the contract period. Service Provider shall provide outcome measures reports semi-annually, starting from the date of the contract. The reports shall be submitted to the following:

Department of Public Safety
Intake Service Center Division, Attn: Milton Kotsubo
919 Ala Moana Blvd., #401
Honolulu, Hawaii 96814

5. Experience

The applicant shall provide a description of projects/contracts pertinent to the proposed services. Applicant shall include points of contact, addresses, e-mail/phone numbers. The State reserves the right to contact references to verify experience.

1. List of experience as an agency providing substance abuse services;
2. List of experience as an agency providing services to offenders or defendants/ their families.
3. List of contracts performed for PSD;
4. List of other prior contracts with the public sector in providing services in general for male and female offenders or defendants specifically. Discuss any problems or difficulties encountered in prior contracts. Applicant shall provide a point of contact and telephone number for each contract listed. PSD reserves the right to contact any of the listed points of contact to inquire about the applicant's past service performance and personnel;
5. Success applicant has had in recruiting and retaining quality staff; and
6. Applicant's current financial statement and any financial audits completed in the last three (3) years.

For those agencies that do not meet the one-year experience requirement, an exception can be made. The request for an exception shall include at a minimum a discussion of the following:

1. The reasons why the exception is being requested (i.e. the reasons why the Service Provider does not meet the one year experience requirement, the service for which funds are being requested is a new service, etc.)
2. The qualifications and experience of the organization in providing services for other related state programs in the past.

3. Description of the activities performed to date and accompanying statistical data.

6. Coordination of services

The applicant must demonstrate the ability to coordinate program activities, appointments and interviews with correctional counselors, security staff, and other correctional staff.

7. Reporting requirements for program and fiscal data

Progress reports are due **seven (7) working days after the last working day of the month for that particular month.** Service Provider shall submit monthly written progress reports to the referring PTO. Progress reports shall include the following:

- First and last name of the defendant
- Date of the report
- Time period the report covers
- Number of attended sessions versus the total number of sessions offered during the time period covered by the report
- Anticipated release date from treatment

Each progress report shall be stamped "Confidential" in the upper right corner on the first page and forwarded to the PTO. Reports shall focus on the content of the defendant's progress. Progress reports for group sessions will include the stated goals covered during the reporting period, defendant's improved performance to reach the stated goal, any problems (i.e. when defendant lack the support of their family members in treatment) encountered during the reporting period, and how these problems were addressed. Inadequate progress reports and/or failure to provide progress reports fourteen (14) working days after the last working day of the month, will be grounds for contract termination.

C. Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the proposed services. If facilities are not presently available, describe plans to secure facilities. Also describe how the facilities meet ADA requirements, as applicable, and special equipment that may be required for the services.

2.5 COMPENSATION AND METHOD OF PAYMENT

As compensation for work to be performed by the Service Provider, the State agrees to pay the Service Provider, the total sum not to exceed One Hundred Twenty Three Thousand and One Hundred Fifty Six Dollars (\$123,156) for the initial 12 months and One Hundred Eighty-Eight Thousand and Seventy Six Dollars (\$188,076.00) for the following year, subject to the availability of funds.

The unit of service and unit rate shall be based on price per bed per day based on an estimated number of beds and price per bed day. The unit of service and unit rate shall be based on price per treatment. The number of beds may be increased provided that funds are available from underutilized vacant bed days. The ability to provide services will be dependent upon the ability to charge the specific dollar amount per day from the program budget.

The Applicant shall provide the following service unit rates per defendant include all taxes and shall be the all-inclusive cost to the State:

Residential:

Cost per participant per bed day

Intensive Outpatient:

Cost per day which shall include a minimum of three (3) hours per day of face-to-face individual, group and/or family sessions

IOP requirements:

- 9 hours/week minimum
- 15 hours/week maximum
- Maximum Length of Stay is 136 hours
- 15-minute increment bill is allowed after the first 60 minutes of group and the first 30 minutes of individual)
- Case management is 15-minute increment billing

\$__ skill/process group

\$__ education group

\$__ assessment, treatment planning, individual or family counseling

\$__ case management

Outpatient Requirements:

- 1-8 hours/week
- 15-minute increment (bill is allowed after the first 60 minutes of group and the first 30 minutes of individual)
- Case management is 15-minute increment billing

\$__ skill/process group

\$__ education group
\$__ assessment, treatment planning, individual or family counseling
\$__ case management

Service Provider may bill for the day of admission, but not for the day of discharge (only applies to Residential Treatment). Reimbursable activities shall consist of face-to-face Individual sessions including screening, assessment, treatment planning, and counseling; and group sessions including process, task, education, skill building, and recreation groups; and family counseling.

Service Provider may only bill for screenings that result in an defendant's admittance into the Residential or IOP.

Pricing shall be based on unit of service pricing structure. The pricing shall include all taxes, shall be the all-inclusive cost to the State, and no other charges will be honored.

Proposals must include the unit cost for assessments and treatment planning, educational and treatment services, individual counseling, continuing care, and booster sessions for completed IOP participants. Proposal must include the unit cost per hour, per defendant, per group for each component as applicable and as well as the estimated number of units to be provided.

Service Provider shall not receive separate compensation for time spent in consultation with Department staff regarding curriculum development, staff meetings and case conferences.

Total payment under this Agreement shall not exceed \$123,156 for the initial 12 months and \$188,076 for the following year and subject to the availability of funds for the initial term of this contract. Any costs incurred over the sums set out in the budget shall be approved by formal contract modification or be at the Service Provider's sole risk

Service Provider shall submit an original invoice and two copies each month indicating the contract number, number of modules conducted by phase, and payment due. If a Sub-Service Providers performed the services indicate full business name of sub-service Service Provider. All invoices shall be accompanied by documentation and shall include:

- a. The date and time of each session
- b. A signed copy of the Attendance Sheet by the Service Provider as to the accuracy and authenticity.

Invoices shall be itemized by the name of each defendant, date of each session (by treatment modality) attended during the month. Invoices shall reference the contract number. Invoices shall be signed by the Service Provider's designee to verify the accuracy and authenticity. Along with the

invoice, the Service Provider shall attach an attendance sheet that will include the following:

- Date and time of each treatment service, whether completed or interrupted
- Roster of defendants who attend each session
- For absent defendant, whether they were excused or unexcused
- Signed copy of the attendance sheet by the Service Provider as to the accuracy and authenticity of the parolees presence and participation

Copies of handouts and participant materials and supplies, administrative costs and case management are included in the service components and shall not be billed separately.

The service fee includes all taxes and shall be the all-inclusive cost to the State. The State shall only pay for *completed* sessions.

Service Provider shall submit to PSD's ID, the monthly invoice, original and two (2) copies, for payment of delivered services no later than 30 days after the last session for the month. The address is:

Department of Public Safety
Intake Service Center Division, Attn: Milton Kotsubo
919 Ala Moana Blvd., #401
Honolulu, Hawaii 96814

The monthly invoice shall include the following where the Service Provider's representative shall certify the request for payment and the Department's representative shall approve for payment:

I certify that all expenditures reported or payments requested are to the best of my knowledge in full compliance with the terms and conditions of the contract:

Certified Correct and
Approved for Payment:

Agency Representative

Date

Department Representative

Service Provider shall be compensated in full for each service provided in accordance with the terms and conditions of the resultant Agreement.

A valid "Certificate of Vendor Compliance" from Hawaii Compliance Express, must accompany the invoice for final payment on the contract.

Section 3

Proposal Application Instructions

Section 3

Proposal Application Instructions

General instructions for completing applications:

- *Proposal Applications shall be submitted to the state purchasing agency using the prescribed format outlined in this section.*
- *The numerical outline for the application, the titles/subtitles, and the applicant organization and RFP identification information on the top right hand corner of each page should be retained. The instructions for each section however may be omitted.*
- *Page numbering of the Proposal Application should be consecutive, beginning with page one and continuing through for each section. See sample table of contents in Section 5.*
- *Proposals may be submitted in a three ring binder (Optional).*
- *Tabbing of sections (Recommended).*
- *Applicants must also include a Table of Contents with the Proposal Application. A sample format is reflected in Section 5, Attachment B of this RFP.*
- *A written response is required for **each** item unless indicated otherwise. Failure to answer any of the items will impact upon an applicant's score.*
- *Applicants are **strongly** encouraged to review evaluation criteria in Section 4, Proposal Evaluation when completing the proposal.*
- *This form (SPOH-200A) is available on the SPO website (see 1.2 Website Reference). However, the form will not include items specific to each RFP. If using the website form, the applicant must include all items listed in this section.*

The Proposal Application is comprised of the following sections:

- *Proposal Application Identification Form*
- *Table of Contents*
- *Program Overview*
- *Experience and Capability*
- *Project Organization and Staffing*
- *Service Delivery*
- *Financial*
- *Other*

3.1 Program Overview

Applicant shall give a brief overview to orient evaluators as to the program/services being offered.

3.2 Experience and Capability

A. Necessary Skills

The applicant shall demonstrate that it has the necessary skills, abilities, and knowledge relating to the delivery of the proposed services.

B. Experience

The applicant shall provide a description of projects/contracts pertinent to the proposed services.

- Applicant shall provide point of contact, address, e-mail address, telephone and facsimiles number.
- The State reserves the right to contact references to verify experience.

C. Quality Assurance and Evaluation

The applicant shall describe its own plans for quality assurance and evaluation for the proposed services, including methodology.

D. Coordination of Services

The applicant shall demonstrate the capability to coordinate services with other agencies and resources in the community.

E. Facilities

The applicant shall provide a description of its facilities and demonstrate its adequacy in relation to the proposed services. If facilities are not presently available, describe plans to secure facilities. Also describe how the facilities meet ADA requirements, as applicable, and the special equipment that may be required for the services.

3.3 Project Organization and Staffing

A. Staffing

1. Proposed Staffing

The applicant shall describe the proposed staffing pattern, client/staff ratio and proposed caseload capacity appropriate for the viability of the services. (Refer to the personnel requirements in the Service Specifications, as applicable.)

2. Staff Qualifications

The applicant shall provide the minimum qualifications (including experience) for staff assigned to the program. (Refer to the qualifications in the Service Specifications, as applicable)

B. Project Organization

1. Supervision and Training

The applicant shall describe its ability to supervise, train and provide administrative direction relative to the delivery of the proposed services.

2. Organization Chart

The applicant shall reflect the position of each staff and line of responsibility/supervision. (Include position title, name and full time equivalency) Both the "Organization-wide" and "Program" organization charts shall be attached to the Proposal Application.

3.4 Service Delivery

Applicant shall include a detailed discussion of the applicant's approach to applicable service activities and management requirements from Section 2, Item 2.1, Scope of Work, including (if indicated) a work plan of all service activities and tasks to be completed, related work assignments/responsibilities and timelines/schedules.

In addition to addressing the service activities required in Section 2, the applicant shall also address the following items:

- Assessments tools and criteria to be used to determine treatment level, duration and intensity of treatment, treatment targets, short and long terms goals of treatment (Provide copy of assessment tools and sample treatment plan).
- Treatment methods to be used in each phase, residential, IOP and OP and how these methods will achieve the treatment targets.
- Descriptions of the agency's responses to major and minor rule violations.

- Describe how periodic assessments are carried out to measure progress and the programs response to poor progress or lack of progress (Provide copy of assessment if different from the initial assessment).
- Criteria used to decide when clients move to the next phase
- Completion criteria
- Supervision methods including forms used to monitor line staff.

3.5 Financial

A. Pricing Structure

Applicant shall submit a cost proposal utilizing the pricing structure designated by the state purchasing agency in Section 2. The cost proposal shall be attached to the Proposal Application.

All budget forms, instructions and samples are located on the SPO website. (See subsection 1.2, Websites References for website address.) The following budget form(s) shall be submitted with the Proposal Application:

B. Other Financial Related Materials

1. Accounting System

To determine the adequacy of the applicant's accounting system as described under the administrative rules, the following documents are requested as part of the Proposal Application (may be attached):

3.6 Other

A. Litigation

The applicant shall disclose and explain any pending litigation to which they are a party, including the disclosure of any outstanding judgment.

Section 4

Proposal Evaluation

Section 4

Proposal Evaluation

4.1 Introduction

The evaluation of proposals received in response to the RFP will be conducted comprehensively, fairly and impartially. Structural, quantitative scoring techniques will be utilized to maximize the objectivity of the evaluation.

4.2 Evaluation Process

The procurement officer or an evaluation committee of designated reviewers selected by the head of the state purchasing agency or procurement officer shall review and evaluate proposals. When an evaluation committee is utilized, the committee will be comprised of individuals with experience in, knowledge of, and program responsibility for program service and financing.

The evaluation will be conducted in three phases as follows:

- Phase 1 - Evaluation of Proposal Requirements
- Phase 2 - Evaluation of Proposal Application
- Phase 3 - Recommendation for Award

Evaluation Categories and Thresholds

<u>Evaluation Categories</u>		<u>Possible Points</u>
<i>Administrative Requirements</i>		
<i>Proposal Application</i>		100 Points
Program Overview	0 points	
Experience and Capability	20 points	
Project Organization and Staffing	15 points	
Service Delivery	55 points	
Financial	10 Points	
TOTAL POSSIBLE POINTS		100 Points

4.3 Evaluation Criteria

A. Phase 1 - Evaluation of Proposal Requirements

1. Administrative Requirements

- Copy of licenses and certificates, as applicable, in accordance with Federal, State and County laws.
- Copy of Special Treatment Facility License.

2. Proposal Application Requirements

- Proposal Application Identification Form (Form SPOH-200)
- Table of Contents
- Program Overview
- Experience and Capability
- Project Organization and Staffing
- Service Delivery
- Financial (All required forms and documents)
- Program Specific Requirements (as applicable)

B. Phase 2 - Evaluation of Proposal Application (100 Points)

Program Overview: No points are assigned to Program Overview. The intent is to give the applicant an opportunity orient evaluators as to the service(s) being offered.

1. *Experience and Capability (20 Points)*

The State will evaluate the applicant's experience and capability relevant to the proposal contract, which shall include:

A. Necessary Skills

4

- Demonstrated skills, abilities, and knowledge relating to the delivery of the proposed services.

B. Experience

4

- Three (3) years of experience providing services to criminal justice offenders.

C. Quality Assurance and Evaluation	4
<ul style="list-style-type: none"> Sufficiency of quality assurance and evaluation plans for the proposed services, including methodology. 	
D. Coordination of Services	4
<ul style="list-style-type: none"> Demonstrated capability to coordinate services with other agencies and resources in the community. 	
E. Facilities	4
<ul style="list-style-type: none"> Adequacy of facilities relative to the proposed services. 	

2. ***Project Organization and Staffing (15 Points)***

The State will evaluate the applicant's overall staffing approach to the service that shall include:

A. Staffing	8
<ul style="list-style-type: none"> <u>Proposed Staffing</u>: That the proposed staffing pattern, client/staff ratio, and proposed caseload capacity is reasonable to insure viability of the services. 	4
<ul style="list-style-type: none"> <u>Staff Qualifications</u>: Minimum qualifications (including experience) for staff assigned to the program. 	4
B. Project Organization	7
<ul style="list-style-type: none"> Supervision and Training: Demonstrated ability to supervise, train and provide administrative direction to staff relative to the delivery of the proposed services. 	4
<ul style="list-style-type: none"> Organization Chart: Approach and rationale for the structure, functions, and staffing of the proposed organization for the overall service activity and tasks. 	3

3. ***Service Delivery (55 Points)***

Evaluation criteria for this section will assess the applicant's approach to the service activities and management requirements outlined in the Proposal Application.

The evaluation criteria may also include an assessment of the logic of the work plan for the major service activities and tasks to

be completed, including clarity in work assignments and responsibilities, and the realism of the timelines and schedules, as applicable.

• Assessment and Treatment Planning	<u>10</u>
• Residential Program	<u>10</u>
• Intensive Out-Patient Program	<u>10</u>
• Out-Patient Program	<u>10</u>
• Education and Treatment Services, Individual, Family/Couple, and Group Counseling.	<u>10</u>
• Description of how the Applicant will provide services to the fluctuating population needs.	<u>5</u>

5. Financial (10 Points)

- Adequacy of accounting system.
- Competitiveness and reasonableness of unit of service, as applicable.
- Financial stability of the applicant.

B. Phase 3 - Recommendation for Award

Each notice of award shall contain a statement of findings and decision for the award or non-award of the contract to each applicant.

Section 5

Attachments

- A. Proposal Application Checklist
- B. Sample Table of Contents
- C. Questions and Responses as a Result of RFI held on September 27, 2013.

Proposal Application Checklist

Applicant: _____ RFP No.: **PSD 14- ISC-13**

The applicant's proposal must contain the following components in the order shown below. Return this checklist to the purchasing agency as part of the Proposal Application. SPOH forms are on the SPO website.

Item	Reference in RFP	Format/Instructions Provided	Required by Purchasing Agency	Applicant to place "X" for items included in Proposal
General:				
Proposal Application Identification Form (SPOH-200)	Section 1, RFP	SPO Website*	X	
Proposal Application Checklist	Section 1, RFP	Attachment A	X	
Table of Contents	Section 5, RFP	Section 5, RFP	X	
Proposal Application (SPOH-200A)	Section 3, RFP	SPO Website*	X	
Hawaii Compliance Express Verification Certificate	Section 1, RFP	Hawaii Compliance Express SPO Website*	X	
Cost Proposal (Budget)				
SPO-H-205	Section 3, RFP	SPO Website*		
SPO-H-205A	Section 3, RFP	SPO Website* Special Instructions are in Section 5		
SPO-H-205B	Section 3, RFP,	SPO Website* Special Instructions are in Section 5		
SPO-H-206A	Section 3, RFP	SPO Website*		
SPO-H-206B	Section 3, RFP	SPO Website*		
SPO-H-206C	Section 3, RFP	SPO Website*		
SPO-H-206D	Section 3, RFP	SPO Website*		
SPO-H-206E	Section 3, RFP	SPO Website*		
SPO-H-206F	Section 3, RFP	SPO Website*		
SPO-H-206G	Section 3, RFP	SPO Website*		
SPO-H-206H	Section 3, RFP	SPO Website*		
SPO-H-206I	Section 3, RFP	SPO Website*		
SPO-H-206J	Section 3, RFP	SPO Website*		
Certifications:				
Federal Certifications				
Debarment & Suspension		Section 5, RFP		
Drug Free Workplace		Section 5, RFP		
Lobbying		Section 5, RFP		
Program Fraud Civil Remedies Act		Section 5, RFP		
Environmental Tobacco Smoke		Section 5, RFP		
Program Specific Requirements:				
Certificate of Insurance	Section 1, RFP		X	
Special Treatment Facility	Section 2, RFP		X	

*Refer to subsection 1.2, Website Reference for website address.

Proposal Application Table of Contents

1.0	Program Overview	1
2.0	Experience and Capability	1
	A. Necessary Skills	2
	B. Experience	4
	C. Quality Assurance and Evaluation.....	5
	D. Coordination of Services	6
	E. Facilities	6
3.0	Project Organization and Staffing	7
	A. Staffing	7
	1. Proposed Staffing	7
	2. Staff Qualifications	9
	B. Project Organization	10
	1. Supervision and Training	10
	2. Organization Chart (Program & Organization-wide) (See Attachments for Organization Charts	
4.0	Service Delivery	12
5.0	Financial	20
	See Attachments for Cost Proposal	
6.0	Litigation	20
7.0	Attachments	
	A. Cost Proposal	
	SPO-H-205 Proposal Budget	
	SPO-H-206A Budget Justification - Personnel: Salaries & Wages	
	SPO-H-206B Budget Justification - Personnel: Payroll Taxes and Assessments, and Fringe Benefits	
	SPO-H-206C Budget Justification - Travel: Interisland	
	SPO-H-206E Budget Justification - Contractual Services – Administrative	
	B. Other Financial Related Materials	
	Financial Audit for fiscal year ended June 30, 1996	
	C. Organization Chart	
	Program	
	Organization-wide	
	D. Performance and Output Measurement Tables	
	Table A	
	Table B	
	Table C	
	E. Program Specific Requirements	

**Questions and Responses
Resulting From
Request for Information
PSD 14-ISC-13**

- 1) Regarding scope of service, request consideration for inclusion of Outpatient Services (hourly services including group skill building, process group, individual/family/couple counseling, vocational counseling, relapse prevention, drug testing, and case management). This may be helpful for those ISC clients who come directly into IOP as this offers a step down in intensity of service from IOP but prior to Aftercare. Provides ongoing support on a less frequent basis (hourly basis) while the client is still on pre-sentence status. **An Outpatient Program regularly provides between one (1) and eight (8) hours per client per week of face-to-face treatment and one (1) hour of scheduled individual counseling per client per month. The scheduling of one (1) hour per client per week of individual counseling is recommended when clinically indicated.**

Response: *PSD will include Outpatient services; however, the funding (total amount per year) will remain the same. The following Outpatient Program services should be inserted to "III. Scope of Work, A. Service Activities" in before "4. Intensive Outpatient Program (IOP)" and "#5. Residential Program":*

3. Outpatient Program (OP)

Service Providers shall have component for defendants that successfully complete IOP. The outpatient program shall be provided for the purpose of reinforcing and maintaining recovery. It is well documented in the corrections treatment research, and has been observed in PSD's own population, that defendants who complete treatment, and who return to the general population without any continuing support, lose the effects of treatment, and regress back to criminal attitudes and behaviors.

The outpatient component of treatment must encompass the aspects of relapse prevention, criminal conduct behaviors and attitudes, and prevention of recidivism. Additionally, other topics related to recovery should be added to the repertoire of curriculum topics, such as recovery support systems, assertiveness vs. aggression, transportation issues, etc. It should also be noted that the offender must comply with all recommendations that are on his discharge summary from primary treatment. An offender's length of stay in the continuing care program is dependent upon the offender's personal ability and demonstration of maintaining responsible behavior and the counselors' observations and discretion. The continuing care

component may also include process group and individual counseling.

*The outpatient component shall provide non-residential comprehensive specialized services on a scheduled basis for defendants with substance abuse problems. Professional directed evaluation, treatment, case management, and recovery services shall be provided to defendants with less problematic substance abuse related behavior than would be found in a residential or day treatment program. Outpatient programs consist of the following: Service Provider shall provide **between one (1) and eight (8) hours per offender per week** of face-to-face treatment and **one (1) hour of scheduled individual counseling per offender per month**. The scheduling of one (1) hour per offender per week of individual counseling is recommended when clinically indicated.*

The following should be revised in "III. Scope of Work, A. Service Activities," to say, "5. Intensive Outpatient Program (IOP)" and "#6. Residential Program":

The following should be inserted to "Section IV. Compensation and Method of Payment" under the IOP information:

Outpatient:

- 1-8 hours/week*
- 15-minute increment bill is allowed after the first 60 minutes of group and the first 30 minutes of individual)*
- Case management is 15-minute increment billing)*

\$__ skill/process group

\$__ education group

\$__ assessment, treatment planning, individual or family counseling

\$__ case management

- 2) Case Management clarification needed: Under Service Activities "Education and Treatment Services" wording starts off with, "Case Management provides . . ." Under "Section IV Compensation and Method of Payment" it states, "Case management is 15-minute increment billing." Under same section IV case mgmt. is not listed as a reimbursable activity but other face to face services with pricing structure are listed. "Reimbursable activities shall consist of face-to-face . . ." Is Case Management included on the list of reimbursable activities?

Response: *Yes, Case Management should be included on the list of reimbursable activities listed in "Section IV. Compensation and Method of Payment."*

- 3) Clarification needed: Under “Section IV Compensation and Method of Payment” (second to last page on RFI) there is mention of “continuing care and booster sessions for completed IOP participants.” “Continuing Care” and “Booster session” services are not described as a reimbursable service activity under the “Scope of Work” section.

Response: ***DELETE*** “...continuing care and boosters sessions....” in “Section IV. Compensation and Method of Payment.”

- 4) Regarding Compensation and Methods of Payment” suggest that “screening” be coupled with “assessment.” Pricing structure will then have “Screening/Assessment” and this together would be billable if results in a client’s admission to treatment.

Response: *Screening is done by the PTO. When the PTO refers to the vendor, the PTO should have a strong indication that the offender will need treatment.*

DELETE:“...\$___screening...” from the bottom of the “Section IV. Compensation and Method of Payment.”

- 5) Clarification under “Compensation and Methods of Payment,” there is a statement that “Service Provider may bill for the day of admission, but not for the day of discharge.” Suggest that this applies only to Residential Treatment per diem billing. For IOP/OP, billing is based on client attendance and service provision with minimum time requirements; therefore, should these be met, billing could occur for an attended session on a client’s day of discharge.

Response: *“...Service Provider may bill for the day of admission, but not for the day of discharge...” only applies to Residential Treatment per diem billing.*

- 6) Clarification needed with ADAD regarding which funding is to be used as primary payer for an existing ICM client who may also qualify for ISC services under this project.

Response: *In talking to ADAD/Terry Nakano on October 1, 2013, it appears that the ICM contract says that ADAD is the “...payer of last resort....”*